

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET						SERIAL NO. 101774392	FILING DATE
						APPLICANT(S)	
						CLAIMS	
	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT		
	IND	DEP	IND	DEP	IND	DEP	
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50							
TOTAL IND	1	1	1	1	1		
TOTAL DEP.	3	3	3	3	3		
TOTAL CLAIMS	4	4	4	4	4		

BEST AVAILABLE COPY